

DATE SENT/DELIVERED:

**AMARILLO INDEPENDENT SCHOOL DISTRICT
SPECIAL EDUCATION DEPARTMENT**

AMARILLO, TEXAS

PARENT NOTICE OF TRANSFER OF RIGHTS

Student _____ Age _____ Birthdate _____

School _____ Grade _____ Sex _____ Social Security # _____

_____ will turn eighteen (18) years of age and
NAME

become a legal adult on _____ As of the eighteenth birthday, the
DATE

Amarillo Independent School District will continue to send notice to the parent(s) and to the student, but will transfer all other educational rights to the student.*

Yes, I have been given notice of the District's intent to transfer rights when the above named student is eighteen (18) years of age.

_____ I have retained legal guardianship or power of attorney for my child even though
Yes/No he/she has turned eighteen (18) years of age. I have furnished a copy of the legal document to the District.

OR

_____ I have not retained guardianship or power of attorney for my child, but I would like
Yes/No to request the ARD committee to appoint another individual to represent the educational interests of the above named student due to the student's inability to provide informed consent.

SIGNATURE OF PARENT

DATE